

643, 277

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Phx	6764	8/30/00
O.I.P.E. CLASSIFIER	LS		9/3/00
FORMALITY REVIEW	Z	5C851	10-12-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/1/00
2	✓	✓	12/1/00
3	✓	✓	12/1/00
4	✓	✓	12/1/00
5	✓	✓	12/1/00
6	✓	✓	12/1/00
7	✓	✓	12/1/00
8	✓	✓	12/1/00
9	✓	✓	12/1/00
10	✓	✓	12/1/00
11	✓	✓	12/1/00
12	✓	✓	12/1/00
13	✓	✓	12/1/00
14	✓	✓	12/1/00
15	✓	✓	12/1/00
16	✓	✓	12/1/00
17	✓	✓	12/1/00
18	✓	✓	12/1/00
19	✓	✓	12/1/00
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22	✓	✓	12/1/00
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26	✓	✓	12/1/00
27	✓	✓	12/1/00
28	✓	✓	12/1/00
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47	✓	✓	12/1/00
48	✓	✓	12/1/00
49	✓	✓	12/1/00
50	✓	✓	12/1/00

Claim	Final	Original	Date
51	✓	✓	12/1/00
52	✓	✓	12/1/00
53	✓	✓	12/1/00
54	✓	✓	12/1/00
55	✓	✓	12/1/00
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63	✓	✓	12/1/00
64	✓	✓	12/1/00
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82	✓	✓	12/1/00
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85	✓	✓	12/1/00
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93	✓	✓	12/1/00
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95	✓	✓	12/1/00
96	✓	✓	12/1/00
97	✓	✓	12/1/00
98	✓	✓	12/1/00
99	✓	✓	12/1/00
100	✓	✓	12/1/00

Claim	Final	Original	Date
101	✓	✓	12/1/00
102	✓	✓	12/1/00
103	✓	✓	12/1/00
104	✓	✓	12/1/00
105	✓	✓	12/1/00
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110	✓	✓	12/1/00
111	✓	✓	12/1/00
112	✓	✓	12/1/00
113	✓	✓	12/1/00
114	✓	✓	12/1/00
115	✓	✓	12/1/00
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117	✓	✓	12/1/00
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146	✓	✓	12/1/00
147	✓	✓	12/1/00
148	✓	✓	12/1/00
149	✓	✓	12/1/00
150	✓	✓	12/1/00

If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)